



Department of Medical Assistance Services
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<http://www.dmas.state.va.us>

MEDICAID MEMO

TO: Local Education Agencies (School Divisions) Participating in the Virginia Medical Assistance Program

FROM: Cynthia B. Jones, Director
Department of Medical Assistance Services (DMAS)

MEMO: Special

DATE: 1/5/2018

SUBJECT: Ordering, Referring and Prescribing Providers with Local Education Agencies-Implementation of the Affordable Care Act Provider Enrollment and Screening Requirements

This memo addresses, for Local Education Agencies (LEAs) enrolled with the Department of Medical Assistance Services (DMAS), implementation of the provider enrollment and screening regulations published by the Centers for Medicare and Medicaid Services (CMS). CMS requires all state Medicaid agencies to implement the provider enrollment and screening provisions of the Affordable Care Act (ACA) (42 CFR 455 Subpart E) for all applicable groups of providers. These regulations were published in the Federal Register, Vol. 76, February 2, 2011, and were effective March 25, 2011.

Ordering, Referring, and Prescribing Providers

The Code of Federal Regulations 42 455.410(b) describes that State Medicaid agencies must require all ordering, referring or prescribing (ORP) physicians, or other professionals rendering services under the State plan or under a waiver of the plan, to be enrolled as participating providers.

This requirement for ORP providers to enroll is only to meet ACA program integrity requirements designed to ensure that all orders, prescriptions or referrals for items or services for Medicaid beneficiaries originate from appropriately licensed practitioners who have not been excluded from Medicare or Medicaid.

LEA providers, specified below, must obtain a National Provider Identifier (NPI) number and enroll with DMAS as an ORP provider. The NPI number must be entered on the billing form to DMAS for Individualized Education Program (IEP) services, as described on Page 3.

Providers are strongly encouraged to register with the DMAS Provider Web Portal and complete the online enrollment. Instructions for Portal registration are provided below. The Portal includes a streamlined enrollment application for all ORP providers.

No action is required of providers already enrolled with DMAS as ORP providers.

DMAS will complete a federally mandated comprehensive screening process on all applicants prior to enrollment. For providers participating with Virginia Medicaid, DMAS conducts a monthly screening.

All providers will be required to revalidate their enrollment at least every five years. Providers can complete the revalidation process and track their status using the Portal.

These requirements for LEA providers will be in effect for claims with dates of service starting July 1, 2018. Please note that claims will be denied if the ORP NPI number is not enrolled with DMAS as of July 1, 2018.

DMAS Process for Enrolling LEA ORP Providers

The LEA provider types listed below (including contractors to the LEAs) must:

- Apply for a NPI number (if the provider does not already have one), and
- Enroll with DMAS as an ORP provider, which requires the NPI number.

Audiologists	Physicians includes Psychiatrists
Clinical Psychologists	Professional Counselor
Clinical Social Worker	Psychiatric Clinical Nurse Specialist
Marriage and Family Therapist	Psychologist-Limited
Nurse Practitioners	School Psychologist
Occupational Therapists	School Social Worker
Physical Therapists	Speech Therapists

The following LEA provider types are not required to obtain a NPI number or enroll with DMAS:

- Nurses
- Personal Care Assistants
- School specialized transportation providers.

Step 1. Obtain a NPI Number:

- Go to the National Plan and Provider Enumeration System (NPPES) at nppes.cms.hhs.gov. Click on the blue bar “CREATE or MANAGE AN ACCOUNT” and follow the instructions to create an “Identity & Access Management System (I&A)” account and register with NPPES.
- After successfully creating your I&A account, return to NPPES, and using your I&A User ID and Password, log into NPPES where you enter information to receive an NPI number.

Step 2. Register as a User of the DMAS Provider Web Portal:

- Access the DMAS Provider Web Portal via www.viriniamedicaid.dmas.virginia.gov.
- Click on the Provider Enrollment tab, then click on Web Registration and complete the form.
- See ORP FAQs listed under “Quick Links” for general information on the registration and enrollment process.
- Registration assistance is available toll free at 886-352-0496 during non-holiday weekday business hours 8 AM-5 PM.

Step 3. Enroll with DMAS as an ORP provider:

- Access the DMAS Provider Web Portal via www.viriniamedicaid.dmas.virginia.gov.
- To access the ORP enrollment form:
 - Hover over the Provider Services tab
 - Click on Provider Forms Search
 - Type “Ordering” (no quotes) in the Number/Name box.
 - Click on Search
 - Click on “Ordering, Referring or Prescribing (ORP)” (no quotes)
 - Download, print and complete the Ordering, Referring or Prescribing ORP form.
- Sign and date the completed form.
- Fax or mail the form to:

Virginia Medicaid Provider Enrollment Services
PO Box 26803, Richmond, VA 23261-6803
FAX # 888-335-8476

New Billing Requirements and Edits

With dates of service starting July 1, 2018 and later, LEA billings to DMAS for an IEP service must include the ORP provider NPI (for the above provider types) number at block 17b. on the CMS 1500 paper billing form. If you currently bill through Direct Data Entry (DDE) using the DMAS Web Portal, the ORP NPI number is entered in the “Referring Provider NPI” field. If you bill your claims through Electronic Data Interchange (EDI), the loop/segment is loop 2310A, segment NM109 on the 837P X12 transaction. The NPI number of the ORP provider will ensure the timely adjudication of the claims.

For LEAs, the participation of non-school providers (e.g., physicians ordering nursing services via the IEP) necessitates including the physician NPI number on the billing form. The NPI Final Rule requires covered health care providers to disclose their NPI numbers to any entities that request them for use in Health Insurance Portability and Accountability Act of 1996 standard transactions. The directory for looking-up NPI numbers is <https://npiregistry.cms.hhs.gov/>.

DMAS has established the following claim edits to ensure compliance with processing requirements for ORP providers.

DMAS Edit/ESC	Description	HIPAA Codes	Resol/Action Effective 07/01/2018	Comments
0191	Provider Referral Required	CO/207/N286	Denial	This edit will validate that the ORP's NPI number is enrolled in DMAS. Refer to the Attachment A for providers required to have referral.
0194	Attending Provider Not on File	CO/16/N253	Denial	This edit will validate that the attending NPI number is valid and actively enrolled in DMAS. Attending Provider NPI number must be on all UB/837I/DDE institutional claims.
0195	Referring Provider Not on File	CO/207/N286	Denial	This edit will validate the referring NPI number is valid and actively enrolled in DMAS
0196	Referring Provider Not Eligible on Date of Service	CO/207/N286	Denial	This edit will set if the Referring NPI number is not enrolled and active for the dates of service on the claim.
0197	Attending Provider Required	CO/16/N253	Denial	This edit will set if the Attending NPI number on the claim is missing.
0198	Attending Provider Same as Billing Provider	CO/16/N253	Denial	This edit is checking to ensure the Attending NPI number on the institutional claim is not the billing provider. The Institution is expected to be the billing provider.
0199	Attending Provider Not Eligible on Date of Service	CO/16/N253	Denial	This edit will validate that the attending NPI is valid and actively enrolled in DMAS for the dates of service(s) on claim. Attending Provider NPI number must be on all UB/837I/DDE institutional claims.

Application Fees

LEA providers and contractors are not subject to an application fee for enrolling with DMAS.

MAGELLAN BEHAVIORAL HEALTH OF VIRGINIA (Behavioral Health Services Administrator)

Providers of behavioral health services may check member eligibility, claims status, check status, service limits, and service authorizations by visiting www.MagellanHealth.com/Provider. If you have any questions regarding behavioral health services, service authorization, or enrollment and credentialing as a Medicaid behavioral health service provider please contact Magellan Behavioral Health of Virginia toll free at 1-800-424-4046 or by visiting www.magellanoofvirginia.com or submitting questions to VAProviderQuestions@MagellanHealth.com.

MANAGED CARE PROGRAMS

Most Medicaid individuals are enrolled in one of the Department's managed care programs: Medallion 3.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan/PACE provider may utilize different prior authorization, billing, and reimbursement guidelines than those described for Medicaid fee-for-service individuals. For more information, please contact the individual's managed care plan/PACE provider directly.

Contact information for managed care plans/PACE providers can be found on the DMAS website for each program as follows:

- Medallion 3.0:
http://www.dmas.virginia.gov/Content_pgs/mc-home.aspx
- Medallion 4.0:
http://www.dmas.virginia.gov/Content_pgs/medallion_4-home.aspx
- Commonwealth Coordinated Care Plus (CCC Plus):
http://www.dmas.virginia.gov/Content_pgs/mltss-proinfo.aspx
- Program of All-Inclusive Care for the Elderly (PACE):
http://www.dmas.virginia.gov/Content_atchs/ltc/PACE%20Sites%20in%20VA.pdf

COMMONWEALTH COORDINATED CARE PLUS

Commonwealth Coordinated Care Plus is a required managed long term services and supports program for individuals who are either 65 or older or meet eligibility requirements due to a disability. The program integrates medical, behavioral health, and long term services and supports into one program and provides care coordination for members. The goal of this coordinated delivery system is to improve access, quality and efficiency. Please visit the website at: http://www.dmas.virginia.gov/Content_pgs/mltss-home.aspx.

VIRGINIA MEDICAID WEB PORTAL

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, payment status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the Conduent Government Healthcare Solutions Support Help desk toll free, at 1-866-352-0496 from 8:00 a.m. to 5:00 p.m. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

KEPRO PROVIDER PORTAL

Providers may access service authorization information including status via KEPRO's Provider Portal at <http://dmas.kepro.com>.

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:00 a.m. to 5:00 p.m., except on holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

TO ALL MEDICAID PROVIDERS: PROVIDER APPEAL REQUEST FORM NOW AVAILABLE

There is now a form available on the DMAS website to assist providers in filing an appeal with the DMAS Appeals Division. The link to the page is http://www.dmas.virginia.gov/Content_pgs/appeal-home.aspx and the form can be accessed from there by clicking on, "Click here to download a Provider Appeal Request Form." The form is in PDF format and has fillable fields. It can either be filled out online and then printed or downloaded and saved to your business computer. It is designed to save you time and money by assisting you in supplying all of the necessary information to identify your area of concern and the basic facts associated with that concern. Once you complete the form, you can simply print it and attach any supporting documentation you wish, and send to the Appeals Division by means of the United States mail, courier or other hand delivery, facsimile, electronic mail, or electronic submission supported by the Agency.

PROVIDERS: NEW MEDICARE CARDS ARE COMING

CMS is removing Social Security Numbers from Medicare cards to help fight identity theft and safeguard taxpayer dollars. In previous messages, CMS has stated that you must be ready by April 2018 for the change from the Social Security Number based Health Insurance Claim Number to the randomly generated Medicare Beneficiary Identifier (the new Medicare number). Up to now, CMS has referred to this work as the Social Security Number Removal Initiative (SSNRI). Moving forward, CMS will refer to this project as the New Medicare Card.

To help you find information quickly, CMS designed a new homepage linking you to the latest details, including how to [talk to your Medicare patients](#) about the new Medicare Card. Bookmark the [New Medicare Card](#) homepage and [Provider](#) webpage, and visit often, so you have the information you need to be ready by April 1st.

Providers (which includes fee for service, Medicaid Managed Care Organizations, and Commonwealth Coordinated Care Plus) may share the following information with members:

MEMBERS: NEW MEDICARE CARDS ARE COMING

Medicare will mail new Medicare cards between April 2018 and April 2019. Your new card will have a new Medicare Number that's unique to you, instead of your Social Security Number. This will help to protect your identity.

Additional information is available at the following link:

<https://www.medicare.gov/forms-help-and-resources/your-medicare-card.html>